

AFFIDAVIT
AFFIDAVIT FOR LATE REGISTRATION OF BIRTH

I _____ S/O resident of H.No. _____ do hereby solemnly affirm and decline as under: -

1. That a Male/Female child was born to my wife Mrs. _____ at _____ on _____. The order of this male/female child is _____.
2. That the said male/female child was finally named as _____.
3. That the delivery case was conducted by Dr./Dai _____ resident of _____ H.No. _____.
4. That the said male/female child name is real and natural child of Mrs. _____ W/o Sh. _____ has not been adopted by Mrs. _____ W/o Sh. _____ or Sh. _____ s/o Sh. _____ either through Court Sub Magistrate or otherwise.
5. That the said event of birth of male/female child has not been registered previously either by the deponent of Doctor or Dai.
6. That the date and place of birth of this male/female child has not been changed/manipulated.
7. That the deponent prays for the registration of birth of this male/female child.

DEPONENT

VERIFICATION: -

Verified that the above statement of mine are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Verified at Chandigarh on.

DEPONENT

AFFIDAVIT
SPECIMEN OF LATE REGISTRATION OF DEATH

I _____ S/O resident of H.No. _____ do hereby solemnly affirm and decline as under: -

1. That my father/mother/wife/Sh./Smt. _____
s/o/w/o Sh. _____ r/o _____
died on _____ at _____.
2. That the death event of Sh./Smt. _____
s/o/w/o Sh. _____ died on _____ could not be reported to the Registrar, Births & Deaths, Chandigarh due to some unavoidable circumstances.
3. That Sh./Smt. _____
s/o/w/o Sh. _____ was suffering from _____.
4. That body of Sh./Smt. _____ S/o/W/o Sh. _____
was cremated at cremation Ground Sector _____ on _____.
5. That is prayed that the death event of Sh./Smt. _____
may be registered in the record of death of Chandgiarh.

DEPONENT

VERIFICATION: -

Verified that the contents of this affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

DEPONENT

(To be filled on Bond paper)
(FORM FOR THE ADDITION OF NAME)

To

The Registrar, Birth & deaths,
Municipal Corporation
Sector 17, Chandigarh

Subject: **Request for Registration of the name of Child** _____
(Name to be filled in CAPITAL LETTERS ONLY)

Sir,

It is certified that male/ female child was born to me/my wife/my
Daughter-in-law Mrs. _____ W/o _____
R/o _____ Place of
Birth _____ on dated _____. The said male
/ female child has finally been named as _____
and will not be changed in the future. I am fully aware of the fact that the name of the
child cannot be changed or altered in any way in future and no request in this regard will
be entertained by the Registration Authority (B&D), Chandigarh as per the provisions
under Registration of Births and Deaths Act, 1969.

You are requested to register the name of child in the record, please.

Dated :

(Signature of Applicant)

Relation with the child _____

Address _____

(To be filled by the office)

Regd. No. _____.

As per rule,

the father/ mother/ Grandfather has deposited Rs.5/- (Receipt No. _____
dt. _____)

OR

request is submitted within one year and hence no fee is required.

Addition of the Child's name as _____

The above addition of name may be approved and attest the same at Col. No.5
& Redg. No _____ in the birth register for the year _____.

Dealing official

A.D.R.

AFFIDAVIT

(Correction in the Death Report)

I, _____ s/o _____ resident
of _____ do hereby solemnly affirm and
declare as under : -

1. That Sh./Smt. _____ S/o,W/o _____
resident of _____ was admitted
_____ and died on _____.

2. That the name of the deceased Sh./Smt.
_____ s/o, W/o _____ was wrongly
been mentioned as _____ as pet/nick name in
the Hospital record.

3. That the body of Sh./Smt. _____ s/o,w/o
_____ was cremated at _____
and the name of the deceased was mentioned there as
_____.

4. That the correct and full name of the deceased is
_____ s/o, w/o _____ is as
_____.

5. That Sh. _____ is the real and natural
son of Sh. _____ and was not adopted by Sh.
_____ s/o _____ or Sh.
_____ s/o Sh. _____.

B. That Smt. _____ w/o _____ has
neither been acquired either by Sh.
_____ s/o _____.

6. That the no person named _____ in my family.

7. That Sh/Smt. _____ is known by both the
names as _____ alias _____ in his/her
family.

Place:

DEPONENT

Dated:

Verification:

The contents of the above statement are true
and correct to the best of my knowledge and belief and
nothing has been concealed therein.

DEPONENT

AFFIDAVIT

(Correction in the Death Report)

FROM TWO CREDIBLE PERSONS

I, _____ s/o _____ resident
of _____ do hereby solemnly affirm and
declare as under : -

1. That Sh./Smt. _____ S/o, W/o _____
resident of _____ was admitted
_____ and died on _____.

2. That the name of the deceased Sh./Smt.
_____ s/o, W/o _____ was wrongly
been mentioned as _____ as pet/nick name in
the Hospital record.

3. That the body of Sh./Smt. _____ s/o, w/o _____
_____ was cremated at _____
and the name of the deceased was mentioned there as
_____.

4. That the correct and full name of the deceased is
_____ s/o, w/o _____ is as
_____.

5. That Sh. _____ is the real and natural
son of Sh. _____ and was not adopted by Sh.
_____ s/o _____ or Sh.
_____ s/o Sh. _____.

B. That Smt. _____ w/o _____ has
neither been acquired either by Sh.
_____ s/o _____.

6. That the no person named _____ in his family.

7. That Sh/Smt. _____ is known by both the
names as _____ alias _____ in his/her
family.

Place:

DEPONENT

Dated:

Verification:

The contents of the above statement are true
and correct to the best of my knowledge and belief and
nothing has been concealed therein.

DEPONENT

AFFIDAVIT

(Correction in the Birth Report)

I, _____ s/o _____ resident
of _____ do hereby solemnly affirm and
declare as under: -

1. That a male/female child was born to Mrs.
_____ w/o _____ resident of
_____ on _____ in _____
Chandigarh (name of Hospital).

2. That the name of the father/mother of the male/female
child wrongly been/has been mentioned as _____
(per nick name).

3. That the name of the father/mother mentioned as
_____ at the hospital record is only his/her
pet/nick name.

4. That the correct and full name of the father/mother of
the male/female child is _____.

5. That Mrs./Sh. _____ is known by both the
names _____ alias _____ in my family.

6. That there is not person named _____ in my
family.

7. That the male/female child born on _____ has
neither been adopted or acquired either by Mrs.
_____.

8. That the said male/female child is the real and natural
born to Mrs. _____ w/o _____
s/o _____.

Place:

DEPONENT

Dated:

Verification:

The contents of the above statement are true
and correct to the best of my knowledge and belief and
nothing has been concealed therein.

DEPONENT

AFFIDAVIT

FROM TWO CREDIBLE PERSONS

(Correction in the Birth Report)

I, _____ s/o _____ resident
of _____ do hereby solemnly affirm and
declare as under : -

1. That a male/female child was born to Mrs.
_____ w/o _____ resident of
_____ on _____ in _____
Chandigarh (name of Hospital).

2. That the name of the father/mother of the male/female
child wrongly been/has been mentioned as _____
(per nick name).

3. That the name of the father/mother mentioned as
_____ at the hospital record is only his/her
pet/nick name.

4. That the correct and full name of the father/mother of
the male/female child is(are) are _____.

5. That Mrs./Sh. _____ is known by both the
names _____ alias _____ in her/his
family.

6. That there is not person named _____ in his
family.

7. That the male/female child born on _____ has
neither been adopted or acquired either by Mrs.
_____.

8. That the said male/female child is the real and natural
born to Mrs. _____ w/o _____
s/o _____.

9. I personally known to Sh.-----S/o -----from
the last ----- years.

Place:

DEPONENT

Dated:

Verification:

The contents of the above statement are true
and correct to the best of my knowledge and belief and
nothing has been concealed therein.

DEPONENT